



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

IND040888992

REACKNOWLEDGEMENT

CONSERVATION CHEM CO
BOX 6066 INDUSTRIAL
GARY

IN 46406

INSTALLATION ADDRESS

6500 INDUSTRIAL HIGHWAY
GARY

IN 46406

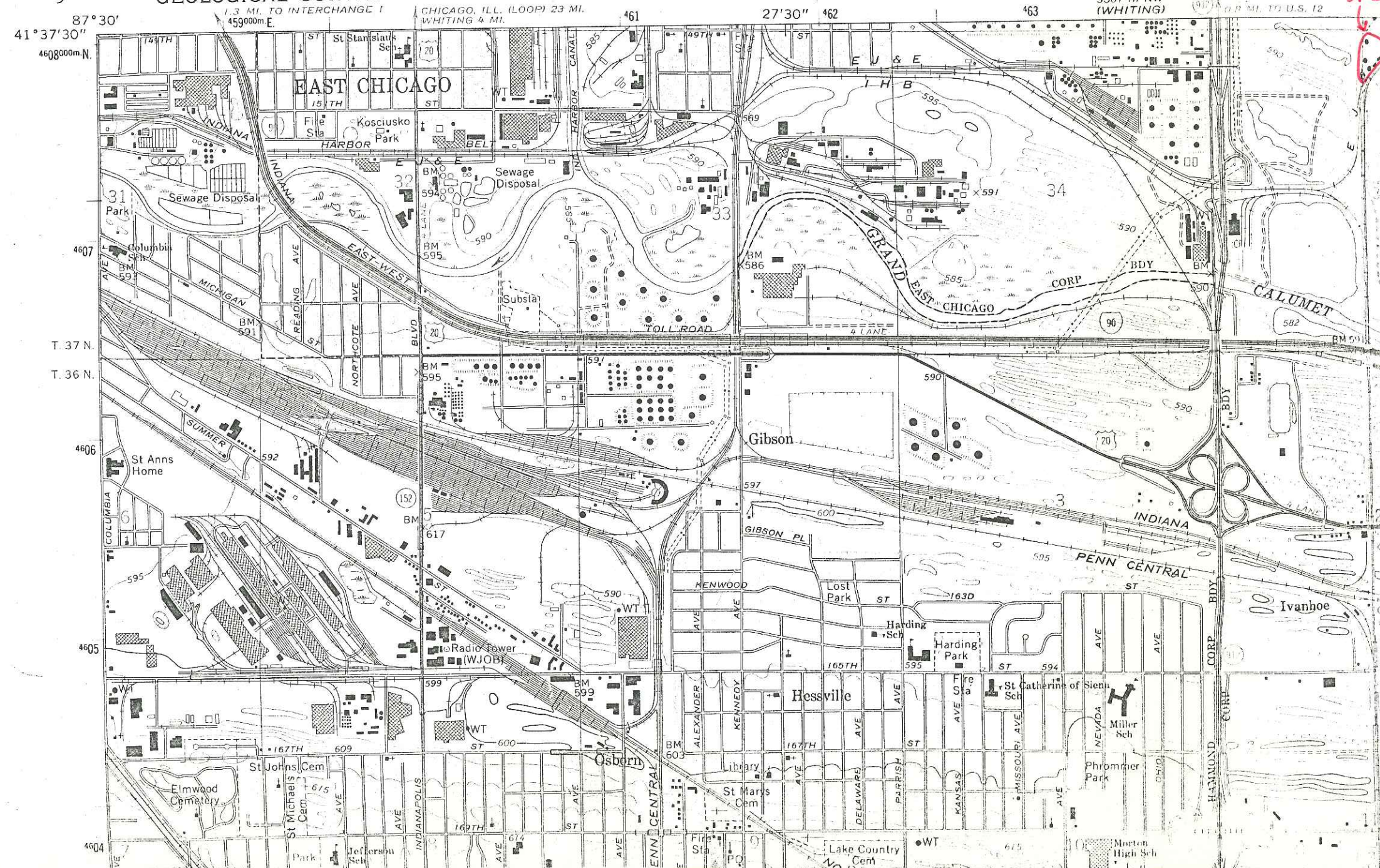
194

3467 11 NE
(LAKE CALUMET)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

STATE OF INDIANA
DEPARTMENT OF NATURAL RESOURCES
INDIANAPOLIS, INDIANA

Conservation
Chemical
Company
OPIL



194

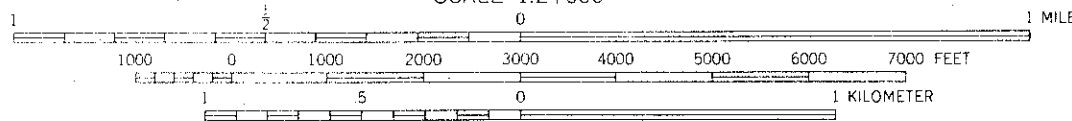
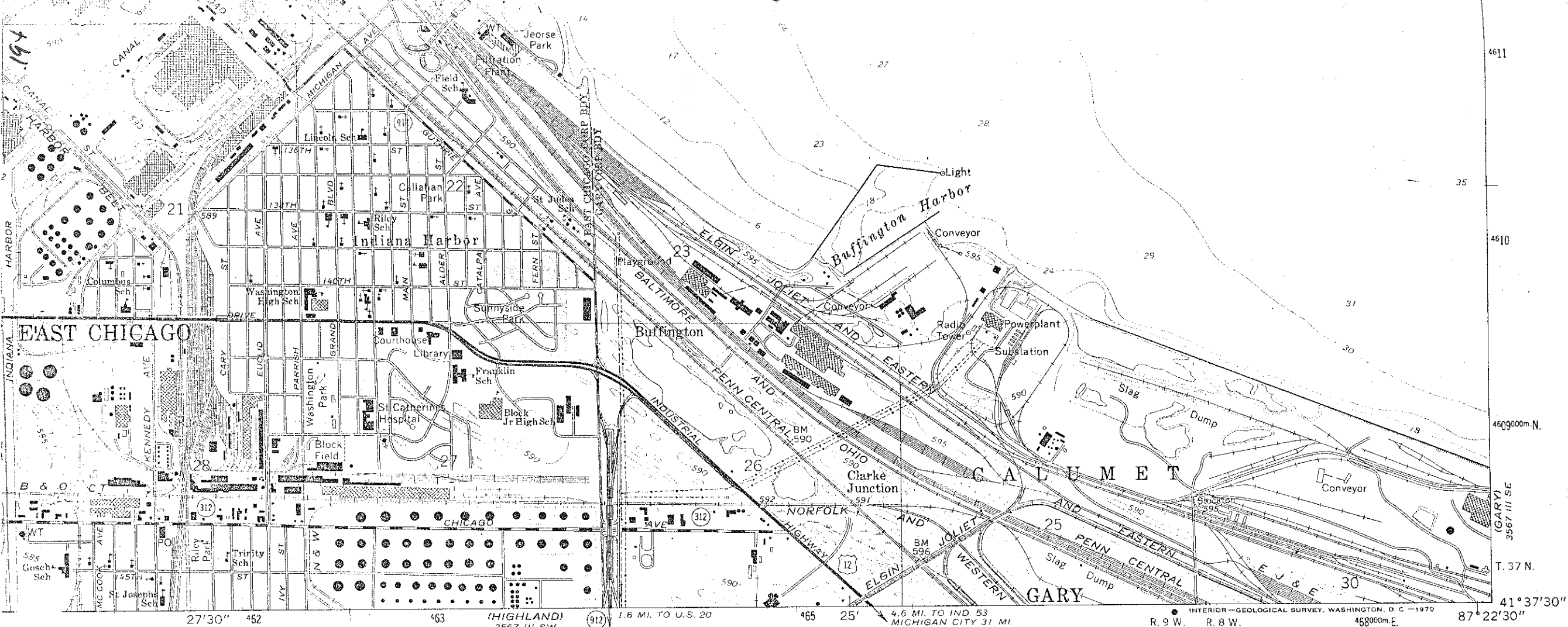
STATE OF INDIANA
DEPARTMENT OF NATURAL RESOURCES
INDIANAPOLIS, INDIANA

Conservation
Chemical
Company
of IL

HIGHLAND QUADRANGLE
INDIANA-LAKE CO.
7.5 MINUTE SERIES (TOPOGRAPHIC)
SW/4 TOLLESTON 15' QUADRANGLE

3567 III SE
(GARY)





CONTOUR INTERVAL 5 FEET

DATUM IS MEAN SEA LEVEL

DEPTH CURVES AND SOUNDINGS IN FEET—DATUM IS LOW WATER 578.5 FEET

THIS MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS
FOR SALE BY U. S. GEOLOGICAL SURVEY, WASHINGTON, D. C. 20242
AND INDIANA DEPARTMENT OF NATURAL RESOURCES, INDIANAPOLIS, INDIANA 46204
A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST



QUADRANGLE LOCATION

ROAD CLASSIFICATION

Primary highway, all weather, hard surface	Secondary highway, all weather, hard surface
Light-duty road, all weather, improved surface	

Interstate Route
 U. S. Route
 State Route

WHITING, IND.

NW/4 TOLLESTON 15' QUADRANGLE
N4137.5—W8722.5/7.5

1968

AMS 3567 III NW—SERIES V851

UTM GRID AND 1968 MAGNETIC NORTH
DECLINATION AT CENTER OF SHEET



CONSERVATION CHEMICAL COMPANY

106 West 14th Street
Suite 2406
Kansas City, Missouri 64105
Area code 816-421-8494

February 19, 1981

Y. J. Kim
Environmental Protection Agency
Region V
RCRA Activities Office
P.O. Box 7861
Chicago, Illinois 60680

Dear Mr. Kim:

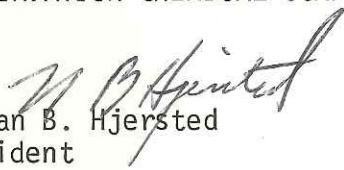
Herein are code numbers of waste generators we are interested in in
Region V:

K062	F007
P029	F008
P030	F009
P063	F010
P090	F011
P098	F012
P104	F015
P106	
P121	

We are endeavoring to locate sources of copper, copper salt and iron salt
in a reclamation effort.

Yours very truly,

CONSERVATION CHEMICAL COMPANY


Norman B. Hjersted
President

NBH/psc

sub to notification



FEB 19 1981

S	W	I	N	D	0	4	0	8	8	8	9	9	2	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F001 23 - 26	2 F002 23 - 26	3 F003 23 - 26	4 F005 23 - 26	5 F006 23 - 26	6 F007 23 - 26
7 F008 23 - 26	8 F009 23 - 26	9 23 - 26	10 23 - 26	11 23 - 26	12 23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 K049 23 - 26	14 K062 23 - 26	15 K063 23 - 26	16 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 23 - 26	32 23 - 26	33 23 - 26	34 23 - 26	35 23 - 26	36 23 - 26
37 23 - 26	38 23 - 26	39 23 - 26	40 23 - 26	41 23 - 26	42 23 - 26
43 23 - 26	44 23 - 26	45 23 - 26	46 23 - 26	47 23 - 26	48 23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

Lloyd T. Kaiser

NAME & OFFICIAL TITLE (type or print)

Lloyd T. Kaiser, Admin. Mgr.

DATE SIGNED

8/18/80

FORM 1 GENERAL		ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>	EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px; font-family: monospace; font-size: 1.2em;"> FIND040888992 </div>
LABEL ITEMS I. EPA I.D. NUMBER IND040888992 III. FACILITY NAME CONSERVATION CHEM. CO V. FACILITY MAILING ADDRESS BOX 6066 INDUSTRIAL GARY, IN 46406 VI. FACILITY LOCATION BOX 6066 INDUSTRIAL GARY, IN 46406		GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1	SKIP	CONSERVATION CHEMICAL COMPANY OF ILLINOIS
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IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
WILLIAMS JAMES PLANT MANAGER	312 734 2441

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX			
B. CITY OR TOWN			
C. STATE		D. ZIP CODE	

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
B. COUNTY NAME			
C. CITY OR TOWN		D. STATE	E. ZIP CODE
F. COUNTY CODE (if known)			

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
C	7	2,8,1,9	(specify) Industrial Inorganic Chemicals, Not Elsewhere Classified	C	7	9,9,9,9	(specify) Nonclassifiable Establishments
15	16	17	18	15	16	17	18
C. THIRD				D. FOURTH			
C	7		(specify)	C	7		(specify)
15	16	17	18	15	16	17	18

VIII. OPERATOR INFORMATION

A. NAME												B. Is the name listed in Item VIII-A also the owner?			
C	8	CONSERVATION CHEMICAL COMPANY OF ILLINOIS										66	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
15	16											66			
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)												D. PHONE (area code & no.)			
F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify)												P (specify)		C A 312 734 2441	
E. STREET OR P.O. BOX															
P.O. BOX 6066															
F. CITY OR TOWN												G. STATE		H. ZIP CODE	
B GARY												IN		46406	
IX. INDIAN LAND												Is the facility located on Indian lands?			
												<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)				D. PSD (Air Emissions from Proposed Sources)			
C	9	N	A	C	9	P	A
15	16	17	18	15	16	17	18
B. UIC (Underground Injection of Fluids)				E. OTHER (specify)			
C	9	U	A	C	9		A
15	16	17	18	15	16	17	18
C. RCRA (Hazardous Wastes)				E. OTHER (specify)			
C	9	R	A	C	9		A
15	16	17	18	15	16	17	18

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Conservation Chemical Company of Illinois manufactures iron salts which are used as coagulant aids in the treatment of both potable and waste waters. Some of the raw materials used to produce our finished products are hazardous wastes (e.g., pickle liquor from the steel industry). In some instances, we are paid to remove pickle liquor and other hazardous wastes from the generator's facility. As a consequence, we are also a service facility providing an outlet for specific types of hazardous wastes that can be recycled.

We also plan to receive and store less than truck load quantities of hazardous waste in drums. They will be accumulated at the plant until a truckload of compatible drums can be shipped to an approved landfill. In some cases, liquid wastes will be dewatered and stored in bulk until a truckload is accumulated. It will then be transported to an approved treatment facility.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Norman B. Hjersted, President	<i>N B Hjersted, President</i>	11-18-80

COMMENTS FOR OFFICIAL USE ONLY

C	15	16	17	18
C				

CONTINUE ON REVERSE

III. PROCESSES (continued)**C. SPACE FOR ADDITIONAL PROCESS CODES**
INCLUDE DESIGN CAPACITY.

FOR DESCRIBING OTHER PROCESSES (code "1")

FOR EACH PROCESS ENTERED HERE

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE **CODE**
 POUNDS P
 TONS T

METRIC UNIT OF MEASURE **CODE**
 KILOGRAMS K
 METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY														
W I N D O 4 0 8 8 8 9 9 2													W DUP														
1 2 3 4 5 6 7 8 9 10 11 12													13 14 15 16 17 18 19 20 21 22 23 24 25 26														
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																											
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																							
				1. PROCESS CODES (enter)																							
				27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
1	F001	260	T	5	0	2																					
2	F002	included with above																									
3	F003	" " "																									
4	F005	" " "																									
5	F006	2000	T	5	0	2																					
6	K063	included with above																									
7	F007	450	T	5	0	2																					
8	F008	included with above																									
9	F009	" " "																									
10	K049	285	T	5	0	2																					
11	K062	15000	T	5	0	2	7	0	1																		
12																											
13																											
14																											
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25																											
26																											

IV. DESCRIPTION OF HAZARDOUS WASTE

(continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 1

EPA I.D. NO. (enter from page 1)

S	F	I	N	D	0	4	0	8	8	8	9	9	2	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

4	1	3	7	2	0	N
65	66	67	68	69	70	71

8	7	2	5	3	0	W
72	73	74	75	76	77	78

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

C	E	15	16	55	56	57	58	59	60	61	62	63
---	---	----	----	----	----	----	----	----	----	----	----	----

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

C	F	15	16	45	46	47	48	49	50	51
---	---	----	----	----	----	----	----	----	----	----

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

Norman B. Hjersted

B. SIGNATURE

N B Hjersted, President

C. DATE SIGNED

11.18.80

X. OPERATOR CERTIFICATION

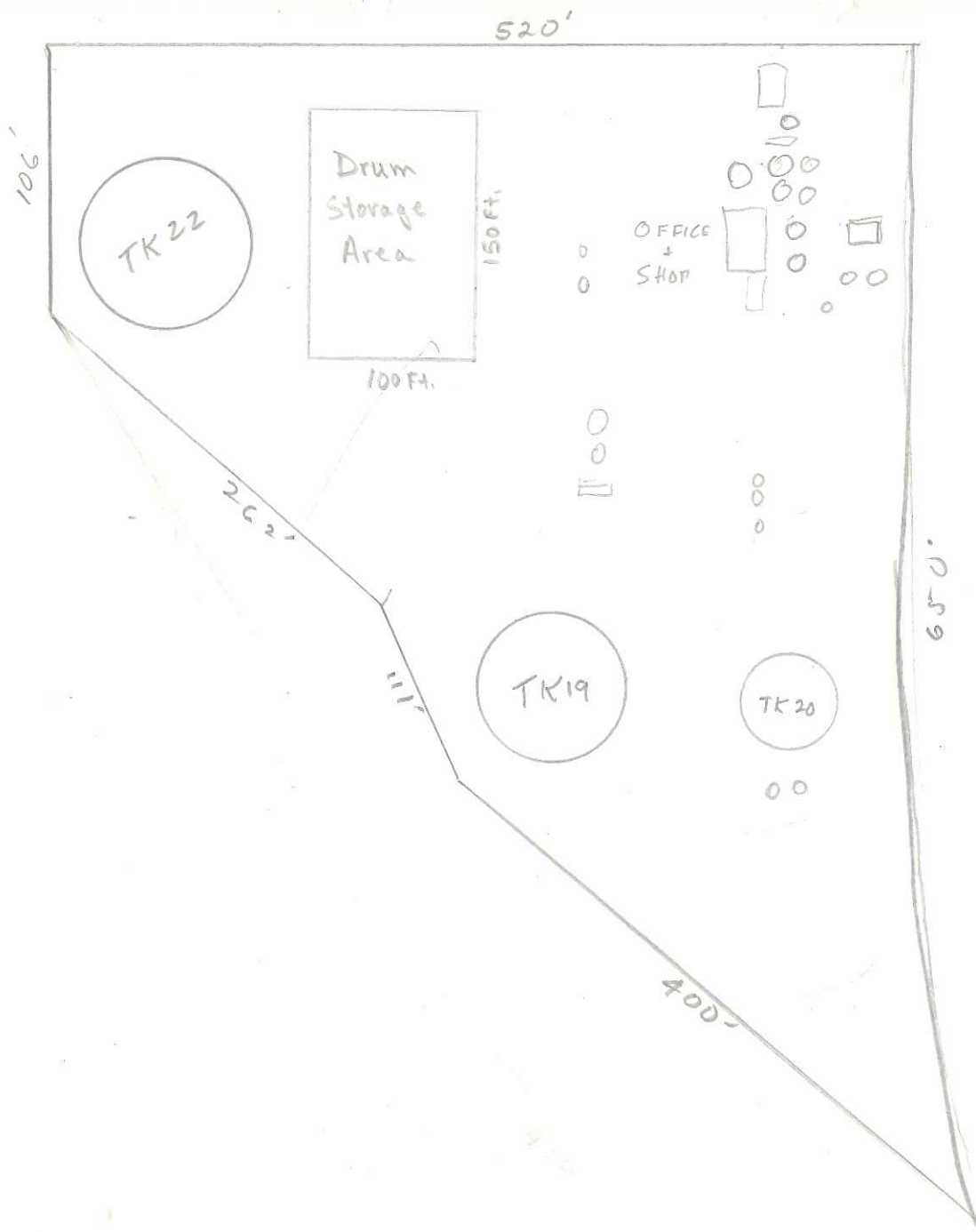
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

V. FACILITY DRAWING (see page 4)



SCALE: 1 INCH = 100 FEET

GARY, IND.



CONSERVATION CHEMICAL COMPANY

106 West 14th Street
Suite 2406
Kansas City, Missouri 64105
Area code 816-421-8494

December 3, 1980

Environmental Protection Agency
Region V, RCRA Activities
P.O. Box 7861
Chicago, Illinois 60680

RE: Conservation Chemical Company of Illinois
EPA I.D. No. IN D040888992

Gentlemen:

On November 18th, 1980, we submitted to you Part A of the RCRA permit application. In so doing, we failed to include photographs of our facility. Those photographs are enclosed herewith.

Very truly yours,

CONSERVATION CHEMICAL COMPANY OF ILLINOIS

Lloyd T. Kaiser/pse

Lloyd T. Kaiser
Marketing Manager

LTK/pse

Enclosures (7 photographs)

*Check
Index for*

DEC 03 1980



CONSERVATION CHEMICAL COMPANY

106 West 14th Street
Suite 2406

Kansas City, Missouri 64105
Area code 816-421-8494

November 19, 1980

EPA Region 5
RCRA Activities
P.O. Box 7861
Chicago, Illinois 60680

RE: Conservation Chemical Company of Illinois
EPA I.D. No. IND040888992

Gentlemen:


On November 18th, 1980, we submitted to you Part A of the RCRA permit application. In reviewing Form 3 of Part A, we discovered that we had failed to include applicable information on pages 1, 3 and 5. The attached pages 1, 3 and 5 contain the information left off originally. We submit these as amendments to our initial application.

We are also enclosing complete topographic maps of the Highland and Whiting, Indiana quadrangles. Although we have already submitted the applicable portions of these maps with Form 1, the larger sheets provide a better indication of the plant location.

Please let us know if you have any questions about the foregoing.

Very truly yours,

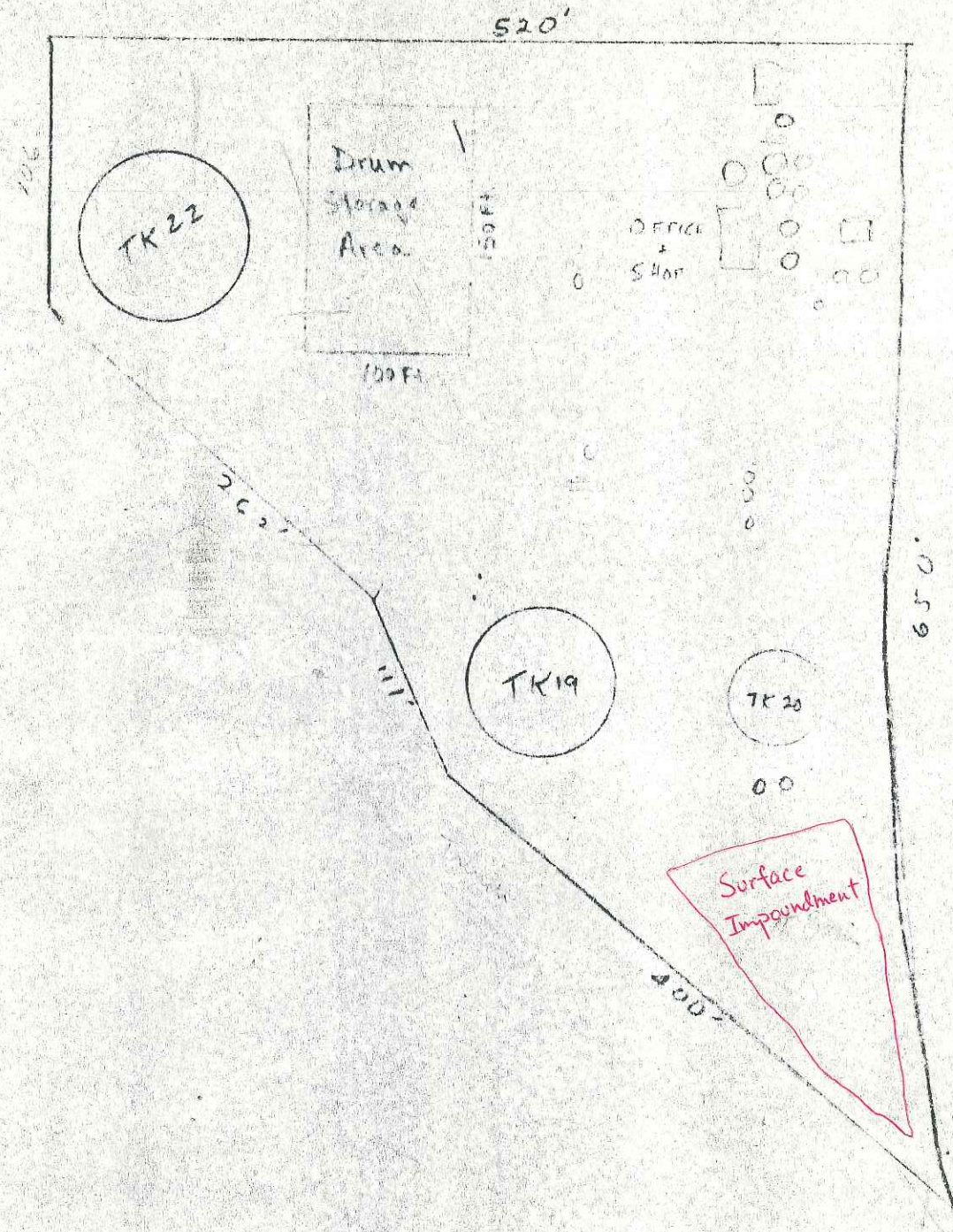
CONSERVATION CHEMICAL COMPANY OF ILLINOIS


Norman B. Hjersted
President

NBH/psc

Enclosures (3)

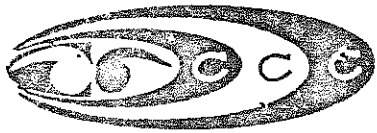
V. FACILITY DRAWING (see page 4)



SCALE: 1" = 100 FEET







CONSERVATION CHEMICAL COMPANY

106 West 14th Street
Suite 2406

Kansas City, Missouri 64105
Area code 816-421-8494

November 19, 1980

EPA Region 5
RCRA Activities
P.O. Box 7861
Chicago, Illinois 60680

RE: Conservation Chemical Company of Illinois
EPA I.D. No. IND040888992

Gentlemen:


On November 18th, 1980, we submitted to you Part A of the RCRA permit application. In reviewing Form 3 of Part A, we discovered that we had failed to include applicable information on pages 1, 3 and 5. The attached pages 1, 3 and 5 contain the information left off originally. We submit these as amendments to our initial application.

We are also enclosing complete topographic maps of the Highland and Whiting, Indiana quadrangles. Although we have already submitted the applicable portions of these maps with Form 1, the larger sheets provide a better indication of the plant location.

Please let us know if you have any questions about the foregoing.

Very truly yours,

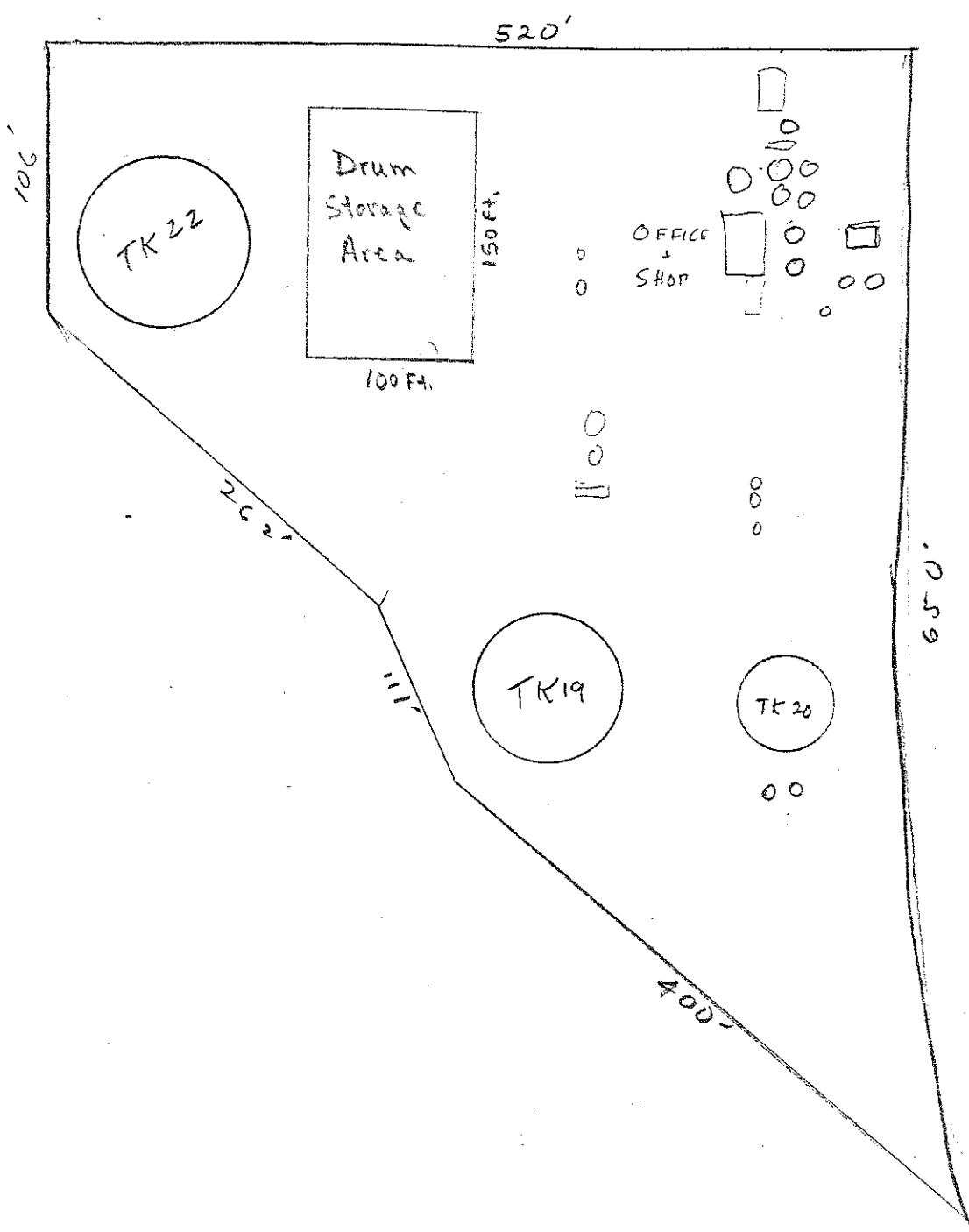
CONSERVATION CHEMICAL COMPANY OF ILLINOIS


Norman B. Hjersted
President

NBH/psc

Enclosures (3)

V. FACILITY DRAWING (see page 4)



SCALE: 1 INCH = 100 FEET

GARY, IND.